## 117000027824

(Re	equestor's Name)	
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Y. SCOTT DEC 11 2021

## **COVER LETTER**

TO: Registration Se Division of Cor				4'
	nagement, LLC	•		
		nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	southered from Cities .		
r rease return an correspo	ondence concerning this matter	to the following:		
	BJ Cottrell			
	· · · · · · · · · · · · · · · · · · ·	Name of Person		_
	Cottrell Tax & Accounting	g, LLC		202 SE
		Firm/Company		
	5147 Castello Drive			2 A C
		Address	<del></del> _	
	Naples, FL 34103			SECTION 24 PM 2: 10
	admin@cottrelltax.com	City/State and Zip Code		- THE TO
	E-mail address: (	to be used for future annual report notifi	cation)	
For further information o	concerning this matter, please c	all:		
BJ Cottrell		239 449-4881		
Name o	of Person	at () Area Code Daytime	Telephone Numbe	ı
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ sca ao r	Tr. P
	Certificate of Status	Certified Copy  (additional copy is enclosed)	Certified	ate of Status &
	ING ADDRESS:	STREET/COURIF Registration Section		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Taylor Management, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on February 3rd, 2017 and assigned Florida document number L17000027824 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Wayne Taylor, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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Effective date, if other than to an effective date is listed, the date in this locument's effective date on the	nust be specific and o block does not me	cannot be prior to d eet the applicable	ate of filing or more statutory filing re	than 90 days after	onal) r tiling.) Pursuan s date will not	at to 605.0207 be listed as
	ved effective da	ate, but not a	n effective tim	e, at 12:01	a.m. on the	earlier of
e record specifies a delay The 90th day after the r	ecord is filed.					
November 15th	ecord is filed.	2021				
The 90th day after the roated November 15th	ecord is filed.		d representative of	a member		

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Filing Fee: \$25.00